

Office of the Director



Overview



Our Mission: To manage, direct, coordinate, and evaluate all CSELS activities

Our Services

- **Guide** CSELS policy formation, scientific oversight, and program planning and development.
- **Identify** program priorities through strategic planning.
- **Review and evaluate** program data for opportunities to make CSELS more effective.
- Coordinate CSELS science, communication, policy, and business management activities.
- Create an organizational framework to strengthen public health laboratory science, policy, and practice within CDC and at local, state, and global levels.
- **Establish** a coordinated approach to address crosscutting issues in laboratory policy, science, and practice, and coordinate program and laboratory integration.
- Recruit strong, credible, dynamic leaders and staff to CSELS to demonstrate the scientific credibility and value of our programs to internal and external partners through research, consultation, service, and innovation.
- Develop a highly collaborative service culture within CSELS, and between CSELS and other CDC programs, to maximize our value to the agency and its partners.
- **Collaborate** with CDC, HHS, other federal agencies, and external public health partners.

Our Activities and Programs

Activities

Science

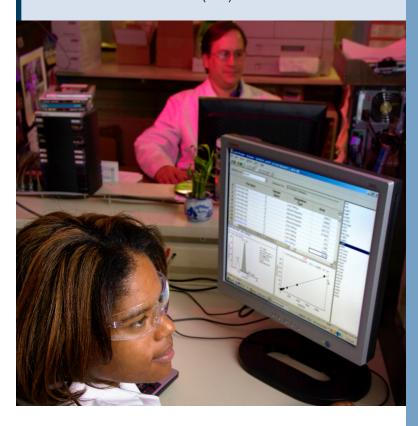
Communication

Policy

Business Management

Programs

- CDC Biosurveillance Coordination Activity
- Health Information Strategy Activity
- Program Integration Unit (PIU)
- Surveillance Data Platform (SDP) With Shared Services



Our Activities

Science

We oversee scientific quality and integrity within CSELS.

Our focus is to

- Provide resources and support for CSELS scientists
- Assure adherence to CDC and federal regulations and policies in conducting research and disseminating data
- Sponsor seminars for CSELS staff
- Provide leadership in determining the scientific direction of CSELS programs
- **Conduct** peer reviews of CSELS scientific programs.

Communication

We provide timely and effective communication services that promote CDC's national efforts.

Our goals are to

- Establish, evaluate, and maintain efficient processes for the development and dissemination of effective communication products and activities for CSELS
- Foster collaborative relationships for communication activities among and between CSELS organizational units and their stakeholders
- Create and disseminate high-quality communication products relevant to CSELS mission, goals, objectives, and stakeholder audiences.

Policy

We provide leadership in policy analysis and strategy, legislative affairs, and partnership engagement.

Our core functions are to

- Develop CSELS annual budget submissions
- Respond to requests for information from CDC, federal leadership, legislators, policymakers, and the public
- Communicate and collaborate with partners to support senior leadership, facilitate program development, and promote CSELS priorities
- Review CSELS documents to ensure that they reflect CDC policies and positions, and that policy implications are communicated clearly, consistently, and accurately.

Business Management

We provide business support services to ensure that CSELS divisions can continually deliver program excellence.

We manage the following

- CSELS budget execution and Working Capital Fund operating costs
- Human resources and training
- Workforce development and wellness
- Information technology and security
- Travel, logistics, and contract management.

CDC Biosurveillance Coordination Activity

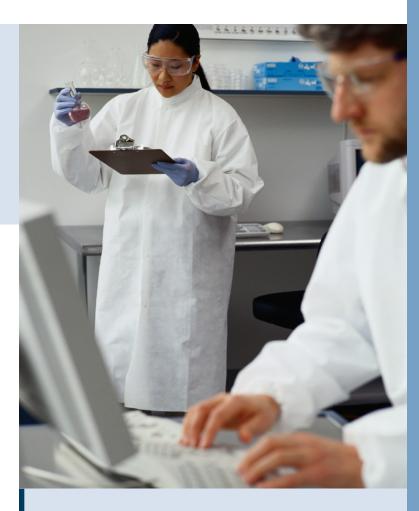
We focus on optimizing secure sharing and integration of CDC program information and health-related data with federal government partners—to foster strategic decision making, coordinate activities, guide resource use, and pursue collaborative opportunities. By improving access to public health surveillance data, we strengthen capabilities for early detection and rapid characterization of public health threats. This allows federal, state, and local health departments to make informed decisions and take effective action.

Our Services

- Work in partnership with CDC programs, other federal agencies, and state and local health departments to provide public health surveillance information that informs national policy and priorities.
- Foster the sharing of public health surveillance and outbreak information to support mission-critical decision making by partners across the federal government.
- Support and advance the mission of public health surveillance at all levels of government through critical evaluation of systems and publication of results.

Our Work

- Lead, represent, and coordinate CDC's input, perspective, and priorities on interagency, multilateral, and executive-level activities.
- Use highly networked partnerships across CDC and the federal government, as well as state, local, tribal, and territorial health departments.
- Publish clear, concise, and **transparent communications** to improve biosurveillance practices.
- Leverage subject matter expertise and use sound scientific judgment to help partners achieve their missions.



Our team coordinates and contributes to reviews and reports, including the

- Office of Science and Technology Policy Biodefense review
- Joint External Evaluation/Global Health Security Agenda
- HHS strategic objective review
- President's Council of Advisors on Science and Technology reports.





Our Impact

- Effective and secure information sharing among federal agencies is crucial for mission-critical decision making. In partnership with the National Biosurveillance Integration Center, we are revising the interagency request for information process and protocols. The updated process will
 - ✓ Provide context for the requests, including why the information is needed
 - ✓ Assign priority to the requests to improve the timeliness of responses
 - ✓ Reduce the burden on programs and subject matter experts by focusing the questions to only information needed by the requestor.
- We put discussion of local capabilities and capacities at the center of every conversation. The local level is where public health happens. Strengthening surveillance and workforce capacities helps state and local health departments address the needs of their jurisdictions. It also helps them respond to the low-probability, high-consequence events biosurveillance was created for.



Public Health Surveillance Is the Backbone of Biosurveillance

While biosurveillance considers information from across various sectors—human, animal, and environmental health—the foundation for early detection and situational awareness is the ongoing systematic collection and analysis of data that public health officials use to prevent and control a disease. It is strong public health surveillance capabilities at the state, local, tribal, and territorial levels that enable a strong biosurveillance network.

Health Information Strategy Activity

We lead the work, education, communication, and coordinated activities that engage CDC in electronic **health information exchange**—particularly the Medicare and Medicaid Electronic Health Record (EHR) Incentive Program, also known as **Meaningful Use**. Our focus is on the future and using EHRs to improve public health **case reporting**—the foundation of disease tracking and monitoring.

Our Services

- Work in partnership with CDC programs, other federal agencies, and state and local health departments to provide technical assistance and education on Meaningful Use.
- Support public health jurisdictions in managing disease reporting.
- Help increase interoperability—the ability of systems to talk to one another and share data—between public health and partner systems, and leverage best practices to share data among stakeholders.



Our Work

We accomplish our work through three central programs

- EHR Meaningful Use Program. Through this program, we partner with the Office of the National Coordinator for Health Information Technology to set national initiatives, establish communities of practice, and support and expand public health-related objectives on Meaningful Use. We also liaise with federal advisory committees about changes in Meaningful Use that may impact public health.
- Reportable Conditions Knowledge Management System (RCKMS). This system provides state and local health departments with comprehensive information about the "who, what, when, where, and how" of reporting disease cases to federal, state, and local authorities. RCKMS serves as an authoritative real-time portal to make reporting more accurate and timely.
- **Public Health Tiger Team.** To build our reputation as a trusted source for the public health community, our Tiger Team has worked to harmonize standards across public health use cases and programs, educate the community on informatics issues, and monitor and participate in national initiatives on interoperability.

Our Impact

- Promise for the future of disease tracking in the United States. Historically, the process of sharing potential cases of reportable diseases with state and local health authorities has been paper-based. This process limits the timeliness and completeness of the information and puts a significant burden on both clinical reporters and health agencies. eCR generates and transmits information on potential cases of reportable conditions from the EHR. It has the potential to provide
 - ✓ More complete and accurate case reports in real time, which allows health officials to act sooner
 - ✓ Earlier detection of cases, which permits earlier intervention and reduces disease transmission
 - ✓ Improved detection of disease outbreaks, which allows health authorities to investigate sooner and discover earlier what fuels the outbreaks
 - ✓ A new infrastructure to rapidly respond to new and emerging health conditions, which helps health authorities gather information for action and give feedback to providers.
- eCR requires a collective commitment among healthcare partners. Our vision is for a nationally interoperable system for eCR that allows for timely sharing of information between state and local jurisdictions. The technical aspects of implementing eCR are solvable. We need public health, healthcare, and EHR vendors to work together to build eCR in the United States in a way that is secure and scalable. CDC, the Council of State and Territorial Epidemiologists, Association of State and Territorial Health Officials, Association of Public Health Laboratories, and Public Health Informatics Institute have come together to explore and begin implementing eCR. This group of partners has already made progress on important elements of the technical framework including initial standards, platform structure, tools, and guides.

Health IT to Advance Public Health

Health IT is evolving rapidly. CDC must play a leadership role in its development to ensure it meets the public's health needs. Our involvement in national efforts puts public health on the table when new health IT initiatives are being developed. We've ensured that public health concerns are reflected in federal health IT programs, initiatives, rules and regulations, reports, and communications. We've expanded the public health data exchange objectives in the Meaningful Use regulations and helped to increase the number of providers meeting these objectives.

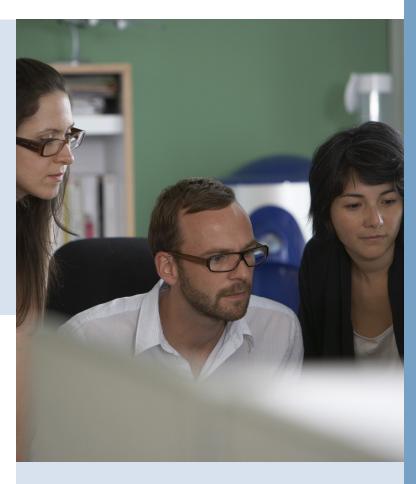


Program Integration Unit (PIU)

PIU is the CSELS central hub and rapid response unit in the Office of the Director. We identify strategic, win-win partnership opportunities for CSELS and CDC-wide programs and external partners (such as nongovernmental organizations and state and local health departments). We respond to urgent national, state, and local public health priorities and collaborate with programs, partners, and preparedness groups to coordinate action. CSELS looks to us to ensure that our common public health goals are met while getting the most efficient and effective use of increasingly limited resources. PIU prides itself on being the center's well-oiled machine that works behind the scenes to ensure that programs progress smoothly and successfully.

Our Services

- **Identify** new opportunities for partnerships, collaboration across programs, leveraging resources, and coordination of common activities.
- Identify and create new forums for sharing information about opportunities for program integration among CSELS divisions, and for strengthening linkages for sustained partnerships with internal and external partners.
- Coordinate and prioritize funding across all CSELS programs.
- **Increase** the center's readiness to respond to existing and emerging threats.
- Serve as the CSELS point of contact for the CDC Emergency Operations Center and the CDC Foundation.
- Manage CSELS umbrella cooperative agreement portfolios with major CDC partner organizations to ensure performance, accountability, and responsible use of resources.

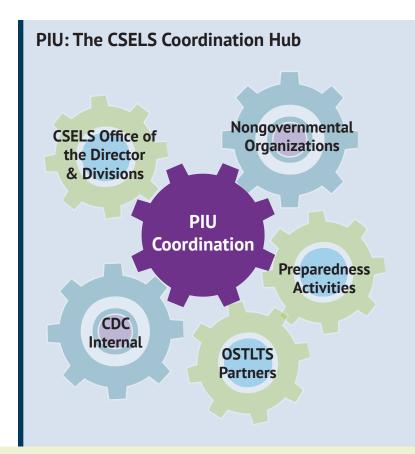


Our Work

- Promote transparent communication within and outside CSELS to keep everyone up-to-date on the center's activities.
- Develop common reporting mechanisms for CSELS program activities, as well as procedures for information sharing among CSELS divisions.
- Establish, maintain, and implement the CSELS'Continuity of Operations Plan (COOP).
- Implement an **Enterprise Content Management** system to deliver information more effectively.

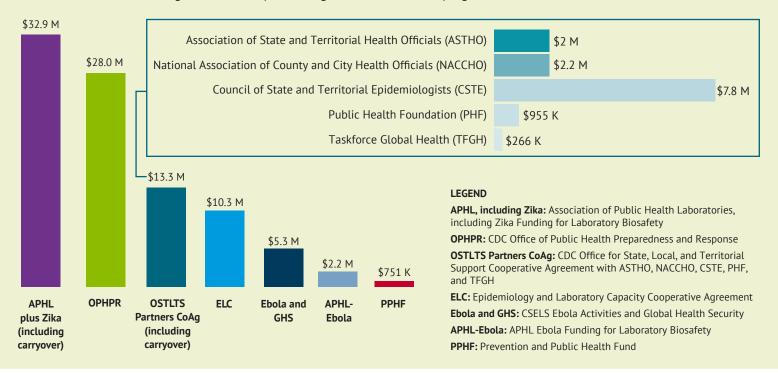
Our Impact

- PIU is the central coordinating unit for CSELS cross-cutting activities. A large and diverse center like CSELS with a wide array of programs and stakeholders that work toward shared goals needs strong organizational support. PIU is the catalyst for that. Our work behind the scenes keeps the center's programs running smoothly, projects moving forward, priorities focused, and our staff informed of activities and accomplishments across divisions.
- We manage and provide oversight for a large portfolio of funding resources for CSELS external and special initiative programs. We've cross-trained staff and increased site visits to public health partners to ensure that limited funds are used efficiently to meet public health needs. We've also increased our capacity to obtain external funding for CSELS programs. By enhancing communication and collaboration throughout CSELS, we ensure that divisions know about CDC-wide funding opportunities.



CSELS FY2016 Funding Portfolio Managed by PIU

In FY2016, external funding for CSELS cooperative agreements and other programs totaled around \$92.8 million.



Surveillance Data Platform (SDP) With Shared Services

CDC's mission to protect and support population health requires vigilant, effective, and responsive surveillance of public health data—and collaborative agility is needed throughout the surveillance process. By working together, CDC and its public health partners at local, regional, state, territorial, tribal, national, and international levels can more swiftly, accurately, and efficiently track and respond to critical health trends and threats.

In 2014, CDC unveiled a Surveillance Strategy to improve its public health data surveillance capabilities by consolidating systems, eliminating redundancies in reporting, and reducing reporting burdens on its public health partners. CDC launched the Surveillance Data Platform (SDP) With Shared Services as part of these capability-building efforts in 2016.



Our Services

- Reduce the number of independent, stand-alone public health information and surveillance systems.
- **Enhance** CDC and partner abilities to securely parse, prepare, and share data.
- Optimize local, regional, national, and international public health response time.
- Provide crosscutting initiatives to improve data availability and usability and to incorporate advanced information technology (IT) solutions.
- **Improve** the interoperability of CDC surveillance activities with electronic health records and other health IT systems.
- **Enhance** accountability, resource use, and innovation in surveillance.
- Accelerate the use of emerging tools for a more nimble public health system.

SDP will provide a platform and set of shared services that support the ability to deploy and share existing services. These "shared services" are defined as people, processes, or technologies that fulfill a common need or request. This platform will enhance CDC's ability to collect, manage, analyze, and disseminate data while reducing the burden on CDC partners. The ultimate goal: to optimize public health surveillance.

Our Work

- Apply an agile approach to platform and services development to ensure an iterative, user-centered process that engages all partners inside and outside CDC.
- Develop a platform of services that enhances the ability to collect, manage, analyze, and disseminate data.
- Provide data analysis and visualization tools, common metrics, indicators, and reference data.
- Enable access to specific data elements, cleanse and validate data, and integrate data sources.
- Perform analytics and generate data visualizations.

Our Impact

- We protect and promote population health and improve response time to critical health threats by making public health data surveillance more efficient for CDC and its public health partners.
- We enhance CDC and public health partner abilities to securely analyze, prepare, and share data.
- We reduce the costs of previously isolated surveillance systems through a systems-level, modernized, "opt-in" solution.
- We make it easier for CDC programs and public health partners to report disease outbreaks and other health threats.

SDP builds the foundation for a future in which CDC scientists can assemble services to create new capabilities in near real-time, allowing a more flexible and robust response to public health emergencies.





Learn more about SDP With Shared Services www.cdc.gov/sdp

Learn more about CDC's Surveillance Strategy www.cdc.gov/surveillance

Office of the Director



Workers in Columbus, Georgia, erect a billboard to promote polio vaccinations in the community. This campaign was produced by the former U.S. Department of Health, Education, and Welfare and CDC (operating as the Communicable Disease Center), in cooperation with the Georgia Department of Public Health and the Muscogee Health Department. Partnerships like these are critical for health prevention efforts. Public health officials in the 1950s used every type of media available to promote the polio vaccination. By 1960, the number of polio cases dropped to about 3,000; by 1979 there were only about 10.